

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|--------------------|--------|----------|
| | <i>[Signature]</i> | | 04/24/00 |
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | 18 | 4/29/00 |
| FORMALITY REVIEW | EVB | 6702 | 06/17/00 |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 + Restricted O Objected

| Claim | Final | Original | Date |
|-------|-------|----------|---------|
| 1 | ✓ | ✓ | 4/24/00 |
| 2 | ✓ | ✓ | 4/24/00 |
| 3 | ✓ | ✓ | 4/24/00 |
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| 10 | ✓ | ✓ | 4/24/00 |
| 11 | ✓ | ✓ | 4/24/00 |
| 12 | ✓ | ✓ | 4/24/00 |
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| 14 | ✓ | ✓ | 4/24/00 |
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| Claim | Final | Original | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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